

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

STRATEGY PAC

ADDRESS (number and street)

138 CONANT STREET

2ND FLOOR

Check if different  
than previously  
reported. (ACC)

BEVERLY

MA

01915

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00497842

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Malczewski, James, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Malczewski, James, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

STRATEGY PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">96663.63</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">70807.75</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">15500.00</span>	<span style="border: 1px solid black; padding: 2px;">60000.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">86307.75</span>	<span style="border: 1px solid black; padding: 2px;">156663.63</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">18282.70</span>	<span style="border: 1px solid black; padding: 2px;">88638.58</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">68025.05</span>	<span style="border: 1px solid black; padding: 2px;">68025.05</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">500.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**STRATEGY PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2016

<b>I. Receipts</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	15500.00	60000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	15500.00	60000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	15500.00	60000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15500.00	60000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3282.70	16638.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3282.70	16638.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	65000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	7000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18282.70	88638.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18282.70	88638.58

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15500.00	60000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	7000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15500.00	53000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3282.70	16638.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3282.70	16638.58

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 11

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STRATEGY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AICPA PAC**

Mailing Address **PALLADIAN CORPORATE CENTER**  
**220 LEIGH FARM RD**

City  
**DURHAM**

State  
**NC**

Zip Code  
**27707-8110**

FEC ID number of contributing  
federal political committee.

**C** **C00077321**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07** / **30** / **2016**

**Transaction ID : SA11C.137284**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address **3 COMMERCIAL PLACE**

City

**NORFOLK**

State

**VA**

Zip Code

**23510-2108**

FEC ID number of contributing  
federal political committee.

**C** **C00009282**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**08** / **29** / **2016**

**Transaction ID : SA11C.144733**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SELECT MEDICAL CORPORATION PAC**

Mailing Address **4714 GETTYSBURG RD**

City

**MECHANICSBURG**

State

**PA**

Zip Code

**17055-4325**

FEC ID number of contributing  
federal political committee.

**C** **C00546119**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**3000.00**

Date of Receipt

**09** / **30** / **2016**

**Transaction ID : SA11C.156493**

Amount of Each Receipt this Period

**3000.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**13000.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 11

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STRATEGY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. UPSPAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City  
ATLANTA

State  
GA

Zip Code  
30328-3474

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**07** / **30** / **2016**

**Transaction ID : SA11C.137283**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

15500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STRATEGY PAC**

Full Name (Last, First, Middle Initial)

**A. HAYFORD, DAVID, A., ,**

Mailing Address 3048 SHOREWOOD DR.

City  
OSHKOSHState  
WIZip Code  
54901-1648Purpose of Disbursement  
ACCOUNTING & REPORTING CONSULTING

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C

Transaction ID : SB21B.I6951

Amount of Each Disbursement this Period

2400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**Mailing Address 1593 SPRING HILL RD #400  
#400City  
VIENNAState  
VAZip Code  
22182-2612Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

FEC Identification Number

C

Transaction ID : SB21B.I6758

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**Mailing Address 1593 SPRING HILL RD #400  
#400City  
VIENNAState  
VAZip Code  
22182-2612Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

FEC Identification Number

C

Transaction ID : SB21B.I6943

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2900.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STRATEGY PAC**

Full Name (Last, First, Middle Initial)

**A. CMDI**Mailing Address 1593 SPRING HILL RD #400  
#400City  
VIENNAState  
VAZip Code  
22182-2612Purpose of Disbursement  
CREDIT CARD FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

C

Transaction ID : SB21B.I6947

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**Mailing Address 1593 SPRING HILL RD #400  
#400City  
VIENNAState  
VAZip Code  
22182-2612Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C

Transaction ID : SB21B.I6948

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

325.00

**TOTAL** This Period (last page this line number only)..... ►

3225.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STRATEGY PAC**

Full Name (Last, First, Middle Initial)

**A. MARCO RUBIO FOR SENATE 2016**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2016

Mailing Address 7875 NW 12TH STREET  
SUITE 200City  
DORALState  
FLZip Code  
33126Purpose of Disbursement  
POLITICAL DONATION

011

Category/  
Type

Candidate Name

**RUBIO, MARCO, , SEN,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ▼

State: FL

District:

FEC Identification Number

C C00620518

**Transaction ID : SB23.I6944**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE GALLAGHER FOR WISCONSIN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2016

Mailing Address 1915 SOUTH WEBSTER AVENUE  
SUITE DCity  
GREEN BAYState  
WIZip Code  
54301Purpose of Disbursement  
POLITICAL DONATION

011

Category/  
Type

Candidate Name

**GALLGHER, MIKE, , ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ▼

State: WI

District: 08

FEC Identification Number

C C00610212

**Transaction ID : SB23.I6945**

Amount of Each Disbursement this Period

5000.00

DEBT RETIREMENT  
CONTRIBUTION☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE GALLAGHER FOR WISCONSIN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2016

Mailing Address 1915 SOUTH WEBSTER AVENUE  
SUITE DCity  
GREEN BAYState  
WIZip Code  
54301Purpose of Disbursement  
POLITICAL DONATION

011

Category/  
Type

Candidate Name

**GALLGHER, MIKE, , ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District: 08

FEC Identification Number

C C00610212

**Transaction ID : SB23.I6946**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

**TOTAL** This Period (last page this line number only).....▶

15000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 11 OF 11

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**STRATEGY PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Red Curve Solutions**Nature of Debt (Purpose):  
Compliance consultingMailing Address 138 Conant Street  
2nd FloorCity  
BeverlyState  
MAZip Code  
01915

Outstanding Balance Beginning This Period

0.00

Transaction ID : 0001

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

500.00

2) **TOTALS** This Period (last page this line number only)..... ►

500.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

500.00